FORM D PROCESSED

SEP 1 0 2008

THOMSON REUTERS

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

1999	
OMB APF	ROVAL
OMB Number:	3235-0076
Expires:	
Estimated aver	age burden
hours per respo	nse 16.00

SEC USE ONLY				
Prefix	Serial			
DATE RECEIVED				

Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
MarketPsy Long-Short Fund, L.P.	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	ULOE IVIAII Processing
A. BASIC IDENTIFICATION DATA	SEP UA 2001
1. Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) MarketPsy Long-Short Fund, L.P.	Washington, DC 101
Address of Executive Offices (Number and Street, City, State, Zip Code) 1546 S. Carmelina Ave, Los Angeles, CA 90025	Telephone Number (Including Area Code) (415) 267-4880
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
Private investment partnership	
Type of Business Organization corporation business trust limited partnership, already formed limited partnership, to be formed	oleas 08059436
Actual or Estimated Date of Incorporation or Organization: OS OS Actual Estimated Date of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	 mated ≎: □Œ-

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a tederal notice.

			A. BASIC IDE	NTIF	ICATION DATA					
2. Enter the information re	quested for the fol	lowing:	<u>, , , , , , , , , , , , , , , , , , , </u>							
• Each promoter of t	he issuer, if the iss	uer has	been organized wi	thin t	he past five years;					
 Each beneficial ow 	• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer.									
Each executive off	icer and director o	f corpor	ate issuers and of o	orpoi	rate general and man	aging	partners of	partne	rship issuers; and	
Each general and r										
Charle Day(as) that Ampley	Promoter		Beneficial Owner		Executive Officer		Director	[7]	General and/or	
Check Box(es) that Apply:	Fromoter	L °	seneticiai Owner	لسا	LACCULIVE OFFICE		Director		Managing Partner	
Full Name (Last name first, i MarketPsy Capital, LLC	f individual)									
Business or Residence Addre 1546 S. Carmelina Ave,	•		•	de)						
Check Box(es) that Apply:	Promoter	E	Beneficial Owner		Executive Officer		Director	Z	General and/or Managing Partner	
Full Name (Last name first, i	f individual)									
Richard Peterson										
Business or Residence Addre	ss (Number and	Street,	City, State, Zip Co	de)						
1546 S. Carmelina Ave, L										
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner	
Full Name (Last name first,	f individual)				 					
Business or Residence Addre	ess (Number and	Street,	City, State, Zip Co	de)				_		
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner	
Full Name (Last name first,	if individual)									
Business or Residence Addre	ess (Number and	Street,	City, State, Zip Co	de)					-	
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner	
Full Name (Last name first,	if individual)				<u>.</u>					
Business or Residence Addre	ess (Number and	Street,	City, State, Zip Co	de)				<u>.</u>		
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner	
Full Name (Last name first,	if individual)									
Business or Residence Addre	ess (Number and	Street,	City, State, Zip Co	de)			_			
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner	
Full Name (Last name first,	if individual)									
Business or Residence Addre	ess (Number and	Street,	City, State, Zip Co	de)						
	(Use bla	ank shee	et, or copy and use	addit	ional copies of this s	heet,	as necessary	()		

				В, П	NFORMAT	ION ABOU	T OFFERI	NG				
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?							Yes	No 🔀				
	Answer also in Appendix, Column 2, if filing under ULOE.								••••	_		
2. What								\$_100,000.00				
					1 '-0						Yes	No
	he offering the informa										R	
comm If a per or state	ission or sim rson to be list es, list the neer or dealer	nilar remune sted is an as: ame of the b	ration for s sociated pe proker or d	solicitation erson or age caler. If me	of purchase ent of a brok ore than five	ers in conno cer or deale c (5) persoi	ection with r registered ns to be list	sales of se d with the S ed are asso	curities in t SEC and/or	he offering. with a state		
Full Name N/A	(Last name	first, if ind	ividual)			•						
	r Residence	Address (N	Jumber an	d Street, C	ity, State, 2	(ip Code)						
					,							
Name of A	ssociated B	roker or De	aler									
States in W	hich Person	ı Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
(Checl	k "All State	s" or check	individua	l States)	•••••	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			•••••		☐ Al	1 States
AL	AK	AZ	ĀR	CA	CO	CT	DE	DC	[FL]	GA	HI	ID
IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
MT	NE	NV	NH	NJ	NM	NY	NC	ND	ОН	OK	OR	PA
RI	SC	SD	TN	TX	(UT)	VT	VA	WA	WV	WI	WY)	PR
Full Name	(Last name	first, if ind	ividual)		· · · · · · · · · · · · · · · · · · ·					- •		
Business of	r Residence	Address (Number ar	nd Street, C	City, State,	Zip Code)						
Name of A	ssociated B	roker or De	aler									. .
States in W	hich Person	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
(Chec	k "All State	s" or check	individua	l States)		••••					All States	
[AL]	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	Ш	ĪD
ĪL	ĪN	ĪA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
MT	NE	NV	NH	NJ	NM	NY	NC	ND	ОН	OK	OR	PA
[RI]	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Full Name	(Last name	first, if ind	ividual)					•	·			
Business of	r Residence	Address (Number ar	nd Street, C	City, State,	Zip Code)						
Name of A	ssociated B	roker or De	aler				· · · · · · · · · · · · · · · · · · ·	•				
States in W	hich Person	1 listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
	k "All State							•••••	***************************************		<u> </u>	l States
AL	AK	ΑZ	ĀR	CA	<u>[CO]</u>	СТ	DE	DC	FL	GA	HI	ID
IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
RI	SC	SD	TN	TX	UT	VΤ	VA	WA	WV	WI	\overline{WY}	PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS $% \left(\mathbf{r}\right) =\left(\mathbf{r}\right)$

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \Box and indicate in the columns below the amounts of the securities offered for exchange and		
	already exchanged. Type of Security	Aggregate Offering Price	Amount Already Sold
		-	55.2
	Debt		\$
	Equity	<u> </u>	\$
	Common Preferred	0.00	0.00
	Convertible Securities (including warrants)	0.00	\$
	Partnership Interests	100,000,000.00	\$ 675,000.00
	Other (Specify)	0.00	\$_0.00
	Total	100,000,000.00	\$ 675,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	6	\$ 675,000.00
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
		Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505	·-	\$
	Regulation A	.	\$
	Rule 504		\$
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fccs		\$
	Accounting Fees		s
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)	_	\$
	Other Expenses (identify)	_	\$
	Total		s 0.00

	C. OFFERING PRICE, NUME	ER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS							
	b. Enter the difference between the aggregate offeri and total expenses furnished in response to Part C — proceeds to the issuer."			\$100,000,000.00						
5.	Indicate below the amount of the adjusted gross pro each of the purposes shown. If the amount for any check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	purpose is not known, furnish an estimate and the payments listed must equal the adjusted gross								
			Payments to Officers, Directors, & Affiliates	Payments to Others						
	Salaries and fees	\$ 0.00	\$ 0.00							
	Purchase of real estate		\$ 0.00	s_0.00						
	Purchase, rental or leasing and installation of macland equipment	ninery	\$_0.00	. 🗆 \$						
	Construction or leasing of plant buildings and faci		\$ 0.00	s_0.00						
	Acquisition of other businesses (including the valu offering that may be used in exchange for the asse issuer pursuant to a merger)	ts or securities of another	□\$_ ^{0.00}	s0.00						
	Repayment of indebtedness		\$ 0.00	\$ 0.00						
	Working capital	—	\$ 0.00							
	Other (specify): Estimated Management Fee, w	\$ 13,500.00	s 661,500.00							
	(2% annually); Performance Fee may also be charged but is not included in estimate because									
	of contingent nature of fee. Investment Capital.		\$. 🗀 \$						
	Column Totals		 \$_13,500.00	\$_661,500.00						
	Total Payments Listed (column totals added)	<u>\$ 675,000.00</u>								
		D. FEDERAL SIGNATURE								
sig	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to furninformation furnished by the issuer to any non-accr	hish to the U.S. Securities and Exchange Commi-	ssion, upon writte							
	ner (Print or Type)	Signature / 10	Date							
	irketPsy Long-Short Fund, L.P.		August 28, 2008	3						
Na	nc of Signer (Print or Type)	Title of Signer (Print or Type)								
Nac	lya Marinin	Administrator for MarketPsy Long-Short Fund	I, L.P.							

